

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Ron Leach for Congress Campaign Committee

ADDRESS (number and street)  
▼

P.O. Box 647

Check if different  
than previously  
reported. (ACC)

Brandenburg

KY

40108

2. FEC IDENTIFICATION NUMBER ▼

C C00543538

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

KY

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
05 / 20 / 2014in the  
State of

KY

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2014

through

M M / D D / Y Y Y Y  
04 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Theresa Drake

Signature of Treasurer

Ms. Theresa Drake

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
05 / 08 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 22

Write or Type Committee Name

Ron Leach for Congress Campaign Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 04 / 01 / 2014

To:

 M M / D D / Y Y Y Y  
 04 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	9409.02	54260.04
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	9409.02	54260.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	14269.14	69630.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	14269.14	69630.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	7710.08	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	35233.77	

## For further information contact:

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 22

Write or Type Committee Name

**Ron Leach for Congress Campaign Committee**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2014

To:

M M / D D / Y Y Y Y  
04 / 30 / 2014

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

6750.00

21237.89

**(ii) Unitemized.....**

939.00

11207.00

**(iii) TOTAL of contributions from individuals ▶**

7689.00

32444.89

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

1720.02

21815.15

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

9409.02

54260.04

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

26600.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

26600.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

50.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

9409.02

80910.04

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 22

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14269.14	69630.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	3569.17
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	14269.14	73199.96

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12570.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9409.02
25. SUBTOTAL (add Line 23 and Line 24).....	21979.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14269.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7710.08

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 22

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**Craig Astor**

Mailing Address 5167 N L And N Turnpike Rd

City

Hodgenville

State

KY

Zip Code

42748-9232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UPS

Occupation

Aircraft Mechanic

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		11		2014

Transaction ID : VN8P9CMDRA5

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)

**ACTBLUE**

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1004.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2014

Transaction ID : VN8P9CMDRA5E

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

**Patricia Berman**

Mailing Address 21174 Hamlin Dr

City

Boca Raton

State

FL

Zip Code

33433-7433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		25		2014

Transaction ID : VN8P9CMDR14

Amount of Each Receipt this Period

250.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....

500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**ACTBLUE**

A.

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1004.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 29 / 2014

Transaction ID : VN8P9CMDR14E

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)

**Archie Faircloth**

B.

Mailing Address 610 W Stephen Foster Ave

City

Bardstown

State

KY

Zip Code

40004-1335

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

N/A

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 04 / 2014

Transaction ID : VN8P9CMDPB9

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Judy M. Judd**

C.

Mailing Address 1241 Island Dr  
Apt 101

City

Ann Arbor

State

MI

Zip Code

48105-2006

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

N/A

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 14 / 2014

Transaction ID : VN8P9CMDPZ5

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1400.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**Edward H Page****A.**Mailing Address 1299 N Tamiami Trl  
Apt 421

City	State	Zip Code
Sarasota	FL	34236-2466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2014

Transaction ID : VN8P9CMDPN6

Amount of Each Receipt this Period

2300.00

Full Name (Last, First, Middle Initial)

**Edward H Page****B.**Mailing Address 1299 N Tamiami Trl  
Apt 421

City	State	Zip Code
Sarasota	FL	34236-2466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2014

Transaction ID : VN8P9CMDPP4

Amount of Each Receipt this Period

2300.00

Full Name (Last, First, Middle Initial)

**Arlene Solomon****C.**

Mailing Address 5501 E El Cedral St

City	State	Zip Code
Long Beach	CA	90815-4113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		02		2014

Transaction ID : VN8P9CMDPC5

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4850.00

6750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 22

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	-------------------------------------	---	-----------------------------

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**Ron Leach**

Mailing Address 62 Merion Ct

City

Brandenburg

State

KY

Zip Code

40108-7102

FEC ID number of contributing federal political committee.

**C** H4KY02089

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

21815.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : VN8P9CMJ7X8

Amount of Each Receipt this Period

1197.52

\* In-Kind: In Kind Contribution -- See Memo'd Disbursements

Full Name (Last, First, Middle Initial)

**Ron Leach**

Mailing Address 62 Merion Ct

City

Brandenburg

State

KY

Zip Code

40108-7102

FEC ID number of contributing federal political committee.

**C** H4KY02089

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

21815.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : VN8P9CMJ8M0

Amount of Each Receipt this Period

522.50

\* In-Kind: Mileage

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

1720.02

1720.02

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ron Leach for Congress Campaign Committee

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement  
Credit Card Processing FeesCandidate Name  
**ACTBLUE**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2014

Amount of Each Disbursement this Period

22.14
-------

Transaction ID : VN7Q19S3DE3

**B. ACTBLUE**

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement  
Credit Card Processing FeesCandidate Name  
**ACTBLUE**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2014

Amount of Each Disbursement this Period

3.17
------

Transaction ID : VN7Q19S3DF1

**C. ACTBLUE**

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement  
Credit Card Processing FeesCandidate Name  
**ACTBLUE**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2014

Amount of Each Disbursement this Period

14.39
-------

Transaction ID : VN7Q19S3DG9

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

39.70

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 382110

City	State	Zip Code
Cambridge	MA	02238-2110

Purpose of Disbursement  
Credit Card Processing FeesCandidate Name  
**ACTBLUE**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

Amount of Each Disbursement this Period

14.23
-------

Transaction ID : VN7Q19S3DH7

**B. Campaign Finance Group**

Mailing Address 33 R St NW

City	State	Zip Code
Washington	DC	20001-1119

Purpose of Disbursement  
Finance Consultant Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : VN7Q19S3CV3

**c. Theresa Drake**

Mailing Address PO Box 443

City	State	Zip Code
Vine Grove	KY	40175-0443

Purpose of Disbursement  
Treasurer Contract Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : VN7Q19S3CW1

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3764.23

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. Farley Printing**

Mailing Address 1013 S. 6th St.

City	State	Zip Code
Louisville	KY	40203-3319

Purpose of Disbursement  
Stationery

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2014

Amount of Each Disbursement this Period

482.70
--------

Transaction ID : VN7Q19S3D29

**B. Farley Printing**

Mailing Address 1013 S. 6th St.

City	State	Zip Code
Louisville	KY	40203-3319

Purpose of Disbursement  
Campaign Materials -- See In Kind CTB from Candidate on 4/30/2014

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 23 / 2014

Amount of Each Disbursement this Period

436.52
--------

Transaction ID : VN7Q19S3FM4

[MEMO ITEM]

\*

**C. Jennifer Leach**

Mailing Address 62 Merion Ct

City	State	Zip Code
Brandenburg	KY	40108-7102

Purpose of Disbursement  
Administrative Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 03 / 2014

Amount of Each Disbursement this Period

176.00
--------

Transaction ID : VN7Q19S08Z2

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

658.70

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. Jennifer Leach**

Mailing Address 62 Merion Ct

City	State	Zip Code
Brandenburg	KY	40108-7102

Purpose of Disbursement  
Administrative Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

Amount of Each Disbursement this Period

419.50
--------

Transaction ID : VN7Q19S3CR0

**B. Ron Leach**

Mailing Address 62 Merion Ct

City	State	Zip Code
Brandenburg	KY	40108-7102

Purpose of Disbursement  
Reimbursements

Candidate Name

**Mr. Ron Leach**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: KY District: 02

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

Amount of Each Disbursement this Period

1113.19
---------

Transaction ID : VN7Q19S3D44

**C. Activate**

Mailing Address 2232 Vermont St

City	State	Zip Code
Lawrence	KS	66046-3066

Purpose of Disbursement  
Voter Contact Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

Amount of Each Disbursement this Period

600.00
--------

Transaction ID : VN7Q19S3DD5

[MEMO ITEM]

\*

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1532.69

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. Farley Printing**

Mailing Address 1013 S. 6th St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

City	State	Zip Code
Louisville	KY	40203-3319

Purpose of Disbursement  
Stationery

Amount of Each Disbursement this Period

382.32
--------

Transaction ID : VN7Q19S3D52

[MEMO ITEM]

\*

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 636 High St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2014

City	State	Zip Code
Brandenburg	KY	40108-9998

Purpose of Disbursement  
Postage

Amount of Each Disbursement this Period

82.30
-------

Transaction ID : VN7Q19S3D60

[MEMO ITEM]

\*

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Ron Leach**

Mailing Address 62 Merion Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

City	State	Zip Code
Brandenburg	KY	40108-7102

Purpose of Disbursement  
Reimbursement: Office Equipment

Amount of Each Disbursement this Period

635.99
--------

Transaction ID : VN7Q19S3D11

Candidate Name

**Mr. Ron Leach**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: KY

District: 02

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

635.99

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. Office Max**

Mailing Address 1331 Boltonfield St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2014

City	State	Zip Code
Columbus	OH	43228-3697

Amount of Each Disbursement this Period

635.99
--------

Purpose of Disbursement  
Office EquipmentCategory/  
Type

Transaction ID : VN7Q19S3D86

[MEMO ITEM]

\*

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Ron Leach**

Mailing Address 62 Merion Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2014

City	State	Zip Code
Brandenburg	KY	40108-7102

Amount of Each Disbursement this Period

649.22
--------

Purpose of Disbursement  
MileageCategory/  
Type

Transaction ID : VN7Q19S3DA2

Candidate Name

**Mr. Ron Leach**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: KY District: 02

Full Name (Last, First, Middle Initial)

**C. Ron Leach**

Mailing Address 62 Merion Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2014

City	State	Zip Code
Brandenburg	KY	40108-7102

Amount of Each Disbursement this Period

568.59
--------

Purpose of Disbursement  
MileageCategory/  
Type

Transaction ID : VN7Q19S3DB0

Candidate Name

**Mr. Ron Leach**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: KY District: 02

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1217.81

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. Ron Leach**

Mailing Address 62 Merion Ct

Date of Disbursement

M M	D D	Y Y Y Y
04	30	2014

City	State	Zip Code
Brandenburg	KY	40108-7102

Amount of Each Disbursement this Period

1197.52
---------

Purpose of Disbursement  
In Kind Contribution -- See Memo'd DisbursementsCategory/  
Type

Transaction ID : VN8P9CMJ7X8I

Candidate Name

**Mr. Ron Leach**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: KY District: 02

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**B. Ron Leach**

Mailing Address 62 Merion Ct

Date of Disbursement

M M	D D	Y Y Y Y
04	30	2014

City	State	Zip Code
Brandenburg	KY	40108-7102

Amount of Each Disbursement this Period

522.50
--------

Purpose of Disbursement  
MileageCategory/  
Type

Transaction ID : VN8P9CMJ8M0I

Candidate Name

**Mr. Ron Leach**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: KY District: 02

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**c. Office Depot**

Mailing Address 4170 Outer Loop

Date of Disbursement

M M	D D	Y Y Y Y
04	22	2014

City	State	Zip Code
Louisville	KY	40219-3849

Amount of Each Disbursement this Period

564.94
--------

Purpose of Disbursement  
Office Supplies -- See In Kind CTB from Candidate on 4/30/2014Category/  
Type

Transaction ID : VN7Q19S3FR6

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

[MEMO ITEM]

\*

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1720.02

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

Full Name (Last, First, Middle Initial)

**A. Splash Digital**

Mailing Address 455 S 4th St

City	State	Zip Code
Louisville	KY	40202-2593

Purpose of Disbursement  
Website Management

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

Amount of Each Disbursement this Period

600.00
--------

Transaction ID : VN7Q19S3CT5

**B. United States Postal Service**

Mailing Address 636 High St

City	State	Zip Code
Brandenburg	KY	40108-9998

Purpose of Disbursement  
Postage -- See In Kind CTB from Candidate on 4/30/2014

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

Amount of Each Disbursement this Period

38.64
-------

Transaction ID : VN7Q19S3FN2

[MEMO ITEM]

\*

**c. Matt Wyatt**

Mailing Address 200 Westwood Ct

City	State	Zip Code
Elizabethtown	KY	42701-2816

Purpose of Disbursement  
Ad Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2014

Amount of Each Disbursement this Period

4000.00
---------

Transaction ID : VN7Q19S3CQ2

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4600.00

14169.14

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 17 OF 22

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8P9A2X2Y8L

Ron Leach for Congress Campaign Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

Ron Leach

**[PERSONAL FUNDS]**

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
62 Merion Ct

City

State

ZIP Code

Brandenburg

KY

40108-7102

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
04 / 01 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 18 OF 22

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8P9A2X2Z6L

Ron Leach for Congress Campaign Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

Ron Leach

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
62 Merion Ct

City

State

ZIP Code

Brandenburg

KY

40108-7102

Original Amount of Loan

19500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

19500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
04 / 20 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

19500.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 19 OF 22

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8P9B42BQ2L

Ron Leach for Congress Campaign Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

Ron Leach

**[PERSONAL FUNDS]**

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
62 Merion Ct

City

State

ZIP Code

Brandenburg

KY

40108-7102

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 16 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 20 OF 22

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8P9C3P4F8L

Ron Leach for Congress Campaign Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)

Ron Leach

**[PERSONAL FUNDS]**

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

62 Merion Ct

City

State

ZIP Code

Brandenburg

KY

40108-7102

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
10 / 16 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

**TOTALS** This Period (last page in this line only)..... ►

26600.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 21 OF 22

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Finance Group**

Nature of Debt (Purpose):

Finance Consultant Fee

Mailing Address 33 R St NW

City State

Zip Code

Washington

DC

20001-1119

Outstanding Balance Beginning This Period

4329.63

Transaction ID : VN5RH9H9B81

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4329.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Finance Group**

Nature of Debt (Purpose):

Finance Consultant Fee

Mailing Address 33 R St NW

City State

Zip Code

Washington

DC

20001-1119

Outstanding Balance Beginning This Period

3500.00

Transaction ID : VN5RH9H9B73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Theresa Drake**

Nature of Debt (Purpose):

Treasurer Fee

Mailing Address PO Box 443

City

State

Zip Code

Vine Grove

KY

40175-0443

Outstanding Balance Beginning This Period

250.00

Transaction ID : VN5RH9H9B99

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

8079.63

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 22 OF 22

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Ron Leach for Congress Campaign Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Theresa Drake**

Nature of Debt (Purpose):

Treasurer Fee

Mailing Address PO Box 443

City State

Zip Code

Vine Grove

KY

40175-0443

Outstanding Balance Beginning This Period

250.00

Transaction ID : VN5RH9H9BA7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Ron Leach**

Nature of Debt (Purpose):

Reimbursements

Mailing Address 62 Merion Ct

City State

Zip Code

Brandenburg

KY

40108-7102

Outstanding Balance Beginning This Period

0.00

Transaction ID : VN5RH9H9BE9

Amount Incurred This Period

304.14

Payment This Period

0.00

Outstanding Balance at Close of This Period

304.14

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

554.14

2) **TOTALS** This Period (last page this line number only) ..... ▶

8633.77

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

26600.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

35233.77